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## FAX COVER SHEET

TO	Examiner FREAY
COMPANY	USPTO
FAX NUMBER	17038729306
FROM	Tracy Druce
DATE	2005-01-04 02:56:45 GMT
RE	Application No. 10/604,327 - RESPONSE to Office Action - Our 07589.0119.PCUS00

## COVER MESSAGE

Dear Examiner,

Please enter and consider the attached Response to Office Action and related papers (15 pages total).

THANK YOU,

- Tracy W. Druce  
Ph: 202.293.7333

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PTO/SB/21 (08-00)

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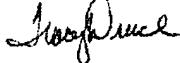
(to be used for all correspondence after initial filing)

		Application Number	10/604,327
		Filing Date	07/11/2003
		First Named Inventor	HAGGANDER
		Group Art Unit	3746
		Examiner Name	FREAY
Total Number of Pages in This Submission	814	Attorney Docket Number	07589.0119.PCUS00

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Proposed Amended Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Declaration/Power of Attorney - Revocation of Prior Powers <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD. Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Form PTO-2038
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	NOVAK DRUCE & QUIGG, LLP Tracy W. Druce
	
Date	01/03/2005

## CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence and any documents referred to herein are being facsimile transmitted to Examiner FREAY, Art Unit 3746, United States Patent and Trademark Office at fax no. 703-872-9306 on: 01/03/2005

Typed or printed name	Daniel Hernandez		
Signature		Date	01/03/2005

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 600

### Complete if Known

Application Number	10/604.327
Filing Date	07/11/2003
First Named Inventor	HAGGANDER
Examiner Name	FREAY
Art Unit	3746
Attorney Docket No.	07589.0119.PCUS00

### METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account		Deposit Account Number: 141437		Deposit Account Name: NOVAK DRUCE LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input type="checkbox"/> Credit any overpayments		

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### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>
Each independent claim over 3 (including Reissues)	50	25
Multiple dependent claims	200	100

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
28	8	x 50	= 400	<b>Fee (\$)</b>
HP = highest number of total claims paid for, if greater than 20.				<b>Fee (\$)</b>
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)
4	1	x	= 200	Fee Paid (\$)
HP = highest number of independent claims paid for, if greater than 3.				

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

**Fees Paid (\$)**

### SUBMITTED BY

Signature	/twd/	Registration No. (Attorney/Agent)	35.493	Telephone	202.293.7333
Name (Print/Type)	Tracy W. Druce			Date	01/03/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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ATTORNEY DOCKET: 07589.0119.PCUS00  
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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:  
HÄGGANDER, Jan *et al.*

Serial No.: 10/604,327

Confirmation No.: 1326

Filed: 07/11/2003

For: ROCKET ENGINE MEMBER AND A METHOD  
FOR MANUFACTURING A ROCKET ENGINE  
MEMBER

Group Art Unit: 3746

Examiner: FREAY, Charles G.

Atty. Dkt. No.: 07589.0119.PCUS00

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## RESPONSE TO NON-FINAL OFFICE ACTION

INTRODUCTORY COMMENTS:

The following is in response to the Non-Final Office Action mailed 01 October 2004.

01/04/2005 EKOLI1 00000013 10604327

1 01 FC:1201 200.00 OP

02 FC:1202 400.00 OP